

10559967

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10/555967		FILING DATE				
CLAIMS							9/14/09						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3		2					53						
4		2					54						
5		2					55						
6		2					56						
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18		2					68						
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41		2					91						
42		2					92						
43		2					93						
44		2					94						
45		2					95						
46		2					96						
47		2					97						
48		2					98						
49		2					99						
50		2					100						
TOTAL IND.	2	↓	2	↓		↓	TOTAL IND.		↓	2	↓		↓
TOTAL DEP.	53	←	49	←		←	TOTAL DEP.		←	1	←		←
TOTAL CLAIMS	51		51				TOTAL CLAIMS			3			

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